

POSITION	INITIALS	ID NO.	DATE
	~1/4		2-1-19
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		2	6-29-01
FORMALITY REVIEW	HC	712	08-09-01
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	✓ 3-24-03
2	✓ 10-2-03
3	✓ 12-19-03
4	✓
5	✓
6	✓
7	✓
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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10/6/01  
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